## LOUISIANA DEPARTMENT OF ENVIRONMENTAL QUALITY WATER AND WASTE PERMITS DIVISION SOLID AND HAZARDOUS WASTE PERMITS SECTION P.O. BOX 4313 BATON ROUGE, LA 70821-4313



### APPLICATION FOR INCLUSION ON THE LOUISIANA UST RESPONSE ACTION CONTRACTORS (RAC) LIST

**Contact: Janaye Tate (225) 219-3062** 

#### APPLICANT INFORMATION

Complete this section to ensure your company information will be displayed correctly on the RAC list.

Provide the address and contact information exactly how you would like it to appear on the RAC list.

There will only be one location listed for each RAC.

Company Name

Contact Name

Address City State Zip Code

Area Code Phone Number Area Code Fax Number

#### APPLICANT REQUIREMENTS

In order to be listed by the LDEQ as an approved RAC for work that is eligible for Motor Fuels Underground Storage Tank Trust Fund reimbursement, applicants must submit on the department-prescribed application form documentation demonstrating and verifying that they meet the following minimum requirements:

- 1. Attach a copy of a current Louisiana State Contractor's License with a specialty compatible with UST assessment/remedial activities in the name of the applicant to be placed on the RAC list. At least one of the following specialties must be listed on the license:
  - a. Hazardous Materials Cleanup and Removal
  - b. Hazardous Materials Site-Remediation
  - c. Hazardous Waste Treatment/Removal

continued on next page

#### APPLICATION FOR INCLUSION ON THE LOUISIANA UST RAC LIST

#### APPLICANT REQUIREMENTS (CONTINUED)

- 2. Attach a copy of a current certificate of insurance showing a minimum of \$1 million of contractor's general liability insurance and a minimum of \$1 million of coverage for an accidental and/or unexpected release from a UST system and/or any other accidental releases related to site-specific RAC activities. The certificate must be in the name of the applicant to be placed on the RAC list and the LDEQ must be listed as an additional insured. The certificate of insurance must also provide that the insurer give 30 days notice of cancellation to all insured.
- 3. Attach a written statement indicating that the applicant's employees comply with applicable Occupational Safety and Health Administration (OSHA) training and certification requirements.
- 4. Provide the name of a registered engineer licensed in Louisiana with expertise in geotechnical engineering and hydrogeology or the name of a Geologist with expertise in these fields currently on the applicant's staff. Attach a copy of the engineer's current engineering registration card or a copy of the geologist's college transcripts.
- 5. Attach a statement signed by the applicant certifying that the RAC will not accept an authorization for work from an eligible participant if the RAC cannot begin work within 72 hours of authorization. The statement must include a commitment that the RAC will retain documentation demonstrating compliance with this requirement.
- 6. Attach a job history demonstrating relevant experience in environmental subsurface investigation and remediation at sites exhibiting subsurface motor fuel contamination. A minimum of five jobs each must be documented, and the applicant must adequately demonstrate the following:
  - a. experience in oversight of installation of groundwater monitoring wells and soil borings;
  - b. experience in developing and sampling/monitoring groundwater monitoring wells;
  - c. experience in the oversight of physical removal, treatment and/or proper disposal of soils contaminated with hydrocarbons or motor fuels;
  - d. experience in the removal of free phase hydrocarbons from the subsurface;
  - e. proficiency with projects that require design and installation/implementation of corrective action programs for the purpose of remediating contaminated soils and/or groundwater sites impacted by USTs.

Note: In order to adequately demonstrate required experience, only the applicant's experience or the experience of a full-time employee of the applicant shall be considered. The experience of a subcontractor or person(s) on retainer shall not be considered.

# REQUIRED SIGNATURE An authorized representative must sign this application. I verify that the information in this document and all attachments is true and correct to the best of my knowledge and belief. Print Name Title Sign Name Date